Epi Update for Friday, August 17, 2018
Center for Acute Disease Epidemiology (CADE)
Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- **West Nile virus activity increasing across Iowa**
- **Legionellosis testing recommendations**
- **CDC *NARMS 2015 Human Isolates Surveillance Report***
- **Toxigenic *Vibrio cholerae* O141 in Nebraska patient with Florida travel**
- **In the news: Wild video - Rabid beaver attacks father, 7-year-old daughter kayaking on river**
- **In the news: This plate gets young kids to eat more veggies, study finds**
- **Infographic: Sleeping in contact lenses is risky**
- **Meeting announcements and training opportunities**

West Nile virus activity increasing across Iowa

There are currently nine confirmed human cases of West Nile virus infection in Iowa, and eight additional cases are under investigation. Non-human West Nile virus activity is also increasing with two reported equine cases and 28 positive mosquito samples. The West Nile virus season typically lasts from late summer into early fall. Please encourage patients to take steps to reduce their risk of exposure to West Nile virus through the fall.

For more information on West Nile virus in Iowa, visit idph.iowa.gov/cade/disease-information/west-nile-virus.

Legionellosis testing recommendations

Late and missed diagnoses of Legionnaires' disease can be fatal, so it is important to identify cases and potential sources of infection. There are multiple indications for testing patients with pneumonia for legionellosis including immunocompromised patients, patients with recent travel history, and patients with possible healthcare-associated pneumonia (onset two or more days after admission to facility). The recommended diagnostic tests for Legionnaires' disease are culture of a lower respiratory specimen on selective media and the *Legionella* urine antigen test. Serological assays can be nonspecific, and a single positive antibody titer does not discriminate between Legionnaires' disease and causes of pneumonia.

Local public health departments investigating legionellosis cases should ask about travel and healthcare exposures in the 10 days before symptom onset. IDPH looks for multiple cases associated with specific locations and reports potential sources of travel and healthcare-associated disease occurring in other states to CDC.

Legionnaires' disease kills one in four of those who get it from a healthcare facility. Creating and using a water management plan as required by the Centers for Medicare and Medicaid Services can help prevent and remediate *Legionella* risk in healthcare facilities.

For more information about legionellosis, visit www.cdc.gov/legionella/index.html.

CDC *NARMS 2015 Human Isolates Surveillance Report*

The National Antimicrobial Resistance Monitoring System (NARMS) represents a collaborative effort among state and local public health, CDC, USDA, and FDA to monitor trends in antimicrobial resistance among several key bacterial organisms that can be found in humans, animals, and retail meat products. The 2015 report provides a summary of findings from whole genome sequencing of *Salmonella* isolates. Key findings from the report include:

- Among 65 ceftriaxone-resistant *Salmonella* isolates, 8 had a resistance gene that is rare in the U.S. and is often linked to international travel.
- Decreased susceptibility to azithromycin (DSA) among *Shigella* increased to 9.8 percent in 2015.
- Among nontyphoidal *Salmonella*, 5.8 percent of the isolates tested were not susceptible to ciprofloxacin, the highest percentage since testing began in 1996.
- Among Enteritidis (the most common *Salmonella* serotype), 14 percent were not susceptible to ciprofloxacin, up from 8 percent in 2014.

To view the full report, visit www.cdc.gov/narms/reports/annual-human-isolates-report-2015.html.

Toxigenic *Vibrio cholerae* O141 in Nebraska patient with Florida travel

A recent CDC MMWR article describes a reported case of toxigenic *Vibrio cholerae* O141 in a Nebraska resident with travel to Florida. *V. cholerae* serogroups O1 and O139 are toxigenic strains associated with epidemic cholera; however, other serogroups, such as O75 and O141, can also produce cholera toxin, leading to a cholera-like illness identified as vibriosis. *Vibrio* species are difficult to culture because they are not easily identified using routine enteric media and often require selective media. However, detection of *Vibrio* species might become more common with increased use of culture-independent diagnostic testing (CIDT) due to increased sensitivity. Some of these CIDT assays are designed to detect a subset of *Vibrio* species and might not identify all cases or only identify cases as vibriosis without species information. Cholera and vibriosis are more common in the Gulf Coast region of the U.S. and are related to exposure to freshwater sources and consumption of raw or undercooked shellfish.

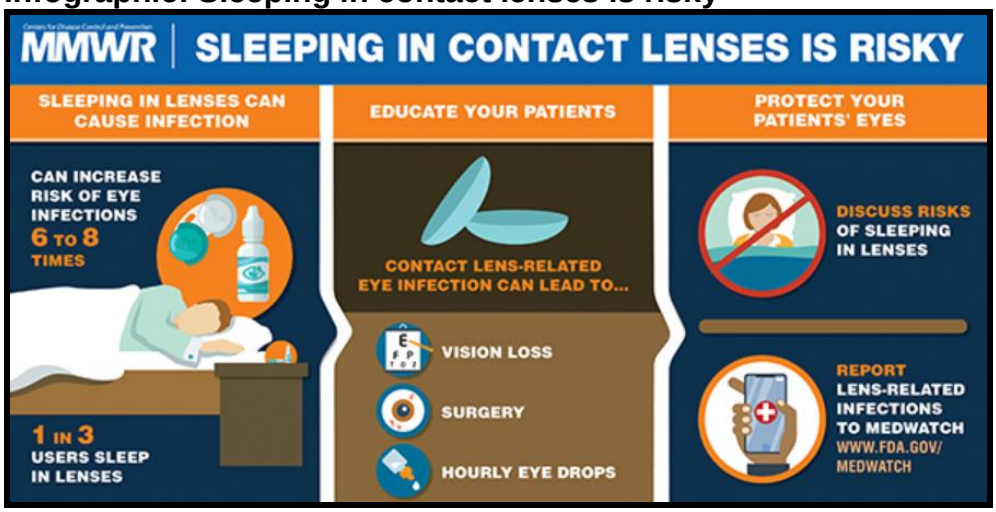
Laboratories are encouraged to send specimens identified through CIDT as *Vibrio cholerae* to SHL for reflex culture testing.

To view the full article, visit
www.cdc.gov/mmwr/volumes/67/wr/mm6730a7.htm?s_cid=mm6730a7_w.

In the news: Wild video - Rabid beaver attacks father, 7-year-old daughter kayaking on river
www.kcci.com/article/wild-video-rabid-beaver-attacks-father-7-year-old-daughter-kayaking-on-river/22695511

In the news: This plate gets young kids to eat more veggies, study finds
www.cnn.com/2018/08/06/health/children-plate-vegetables-food-study/index.html

Infographic: Sleeping in contact lenses is risky



To view in full size, visit
www.cdc.gov/mmwr/volumes/67/wr/mm6732a2.htm?s_cid=mm6732a2_e.

Meeting announcements and training opportunities
IDPH will be hosting the *Influenza 2018-2019 Webinar for Hospital, Clinic, Laboratory, School, and Long-term Care Settings* on September 19, 2018 at 10:30 AM. The webinar will cover influenza activity and surveillance in Iowa, vaccine recommendations, laboratory specimen guidance, and antiviral treatment and prophylaxis for the 2018-2019 season. Those who register will get a link to the recording after the webinar. To register for the webinar, visit zoom.us/webinar/register/WN_NUODdhUYSpufXlCeYn9ZlA.

Have a healthy and happy week!
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